



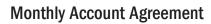
Monthly Account Agreement

For office use only:

Acct: ____ Employee: __

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BILLING INFORMATION (Please select only one option. For more information, please refer to the Terms and Conditions)

| ■ Monthly Invoice/Statement | Credit Card | | ■ Direct Debit (ACH) |
|--|---|--|----------------------|
| Note: \$15 minimum monthly fee | No minimum fee | | No minimum fee |
| If there is no use during the month, then there is NO monthly fee. If there is any use during the month, then the mailed invoice will be \$15 minimum. \$25 fee for returned checks Billing Address: | ☐ Visa ☐ Mastercard ☐ Discover ☐ American Express Card Number ☐ Cardholder ☐ Exp. Date / Billing Address: | | Bank Name: |
| 2100 Mining 5416 Hu 2210 Utilities 5419 Pro 2300 Construction 5610 Ad 3110 Manufacturing Rer 4210 Wholesale Trade 5616 Inv 4410 Motor Vehicle 6110 Ed 4520 Retail 6200 He 4810 Transportation and Warehouse 7100 Ar 5100 Information and Communication 7200 Ac 5200 Finance and Insurance 8110 Ot 5310 Real Estate, Rental, and Leasing Per 5411 Legal 8130 Re 5412 Accounting, Tax Preparation, Bookkeeping, and Pro Payroll Services 8129 Ba | | althcare and Social Assistance s, Entertainment, and Recreation commodations, Food, and Beverage Services her Service Repair/Maintenance or sonal Services ligious Grantmaking Civic or fessional Services, Charities I Bonds sonal or Individual Account by entity or organization for on behalf of and bind any entity Agreement by facsimile, I, and | |
| enforceability or admissibility of this Monthly Accou | nt Agreement on the grounds | that it is not an origina | al document. |
| SignaturePrinted Name | | | |